PTO/SB/17 (10-08)
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|---|-------------------------------------|---------------------------|----------------------|--|-----------------|--|-----------|-----------|
| Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). | | | | Complete if Known Application Number 10/589,348-Conf. #8171 | | | | |
| | | | | | | | | |
| FEE TRANSMITTAL | | | | Filing Date | | August 11, 2006 Eiichi SHIMIZU | | |
| For FY 2009 | | | | 1 11011104 1111011101 | | R. N. Kackar | | |
| Applicant claims small entity status. See 37 CFR 1.27 | | | | 4- | | 792 | | |
| | | | | 7 0 0 0 110 | | 592-0164PUS1 | | |
| TOTAL AMOUNT OF PAYMENT (\$) 810.00 | | | <i>P</i> | kliomey Docket i | 332-01041 001 | | | |
| METHOD OF PAYMENT (check all that apply) | | | | | | | | |
| Check Credit Card Money Order None Other (please identify): | | | | | | | | |
| X Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP | | | | | | | | |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) | | | | | | | | |
| x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee | | | | | | | | |
| Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 | | | | | | | | |
| FEE CALCULATION | | | | | | | | |
| 1. BASIC FILING, SEARCH, AND EXAMINATION FEES | | | | | | | | |
| | FILIN | IG FEES | SEAR | RCH FEES | EXAMINA | ATION FEES | | |
| Application Type | Fee (\$) | Small Entity Fee (\$) | ee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | Fees I | Paid (\$) |
| Utility | 330 | 165 | 540 | 270 | 220 | 110 | • | |
| Design | 220 | 110 | 10 0 | 50 | 140 | 70 | | |
| Plant | 220 | 110 | 330 | 165 | 170 | 85 | | |
| Reissue | 330 | 165 | 540 | 270 | 650 | 325 | | |
| Provisional | 220 | 110 | 0 | 0 | 0 | 0 | | |
| 2. EXCESS CLAIM FEES | | | | | Small Entity | | | |
| Fee Description | | | | | <u>Fee (\$)</u> | Fee (\$) | | |
| Each claim over 20 (including Reissues) | | | | | | | 52 | 26 |
| Each independent claim over 3 (including Reissues) | | | | | | | 220 | 110 |
| Multiple dependent claims | | | | | | | 390 | 195 |
| 20 +- 170 | | | Fee | Paid (\$) | | tiple Dependent Claims (\$) Fee Paid (\$) | | |
| HP = highest number of total | | <u>Fee</u> | <u>(\$)</u> <u>F</u> | ee Paiu (3 | 77 | | | |
| _ | Extra Claims | Fee (\$) | Fee | Paid (\$) | | | | _ |
| 1 -3 or HP = | x | | | | | | | |
| HP = highest number of indep | endent claims paid | d for, if greater than 3. | | | | | | |
| 3. APPLICATION SIZE FEE | | | | | | | | |
| If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer | | | | | | | | |
| listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). | | | | | | | | |
| | | | | | 4! 4L£ | E (\$) | ۳oo | Daid (\$) |
| Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) | | | | | | | | |
| 4. OTHER FEE(S) Fees Paid (\$) | | | | | | | | |
| Non-English Specification, \$130 fee (no small entity discount) | | | | | | | | |
| Other (e.g., late filing surcharge): 1801 Request for continued examination (RCE) (see 37 810.00 | | | | | | | | |
| SUBMITTED BY | | | | | | | | |
| Signature | tegistration No. Attorney/Agent) | 32,181 | Telephone | (703) 205-8000 | | | | |
| Name (Print/Type) Marc S | Weiner | - 07- | <u>- 1 (8</u> | -mornely Ment) | - | Date | January 3 | |

